## Case 19-13971-elf Doc 25 Filed 12/10/19 Entered 12/10/19 12:44:11 Desc Main Document Page 1 of 2

Fill	in this information to identify your c	ase:								
Del	otor 1 Reginald B.	Draughn			_					
	otor 2				_					
Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF PENNSYLVANI	Α						
Cas	se number 19-13971				Check if this	is:				
(If kr					■ An amended filing					
						☐ A supple 13 incom	ment showing e as of the fo			
0	fficial Form 106I					MM / DD	YYYY			
S	chedule I: Your Inc	ome							12/15	
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	ır spouse is not filing w	ith you, do not inclu	ude inforr	nation	about your s	pouse. If mo	ore space is	needed,	
1.	Fill in your employment information.		Debtor 1			Debto	Debtor 2 or non-filing spouse			
	If you have more than one job,	Employment status	■ Employed			□ Em	☐ Employed			
	attach a separate page with information about additional employers.	Employment status	☐ Not employed			□ Not	☐ Not employed			
		Occupation								
	Include part-time, seasonal, or self-employed work.	Employer's name	Dept of Defens							
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?							
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to	report for	any lin	e, write \$0 in t	ne space. Inc	olude your no	on-filing	
	u or your non-filing spouse have mo		ombine the information	on for all e	mploy	ers for that per	son on the lir	nes below. If	f you need	
					F	For Debtor 1		btor 2 or ing spouse		
2.		<b>List monthly gross wages, salary, and commissions</b> (before all deductions). If not paid monthly, calculate what the monthly wage				5,027.12	<u> </u>	N/A	<u>\</u>	
3.	Estimate and list monthly overt	ime pay.		3.	+\$_	0.00		N/A	<u>\</u>	

Official Form 106I Schedule I: Your Income page 1

4. Calculate gross Income. Add line 2 + line 3.

5,027.12

N/A

## Case 19-13971-elf Doc 25 Filed 12/10/19 Entered 12/10/19 12:44:11 Desc Main Document Page 2 of 2

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  13. Do you expect an increase or decrease within the year after you file this form?  No.	Deb	tor 1	Reginald B. Draughn	_	Case	number (if known)	19-13971		
Source of the property of the property and from operating a business, profession, or farm property and from operating a business, and he total monthly net income.  8a. Natincome from rental property and from operating a business, profession, or farm property and from operating a business.  8b. Natincome from rental property and from operating a business, profession, or farm property settlement.  8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. Family support payments that you, a non-filling spouse, or a dependent regularly received include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. Family support payments that you, a non-filling spouse, or a dependent regularly received include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation 8d. \$ 0.000 \$ N/A Be. Social Security  8d. Unemployment compensation 8d. \$ 0.000 \$ N/A Be. Social Security receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutritino Assistance Program) or housing subsidies. Specify:  8d. Other government assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutritino Assistance Program) or housing subsidies. Specify:  8d. Other government assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutritino Assistance Program) or housing subsidies. Specify:  8d. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9 Add all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates,					For	Debtor 1	For Debto	r 2 or	
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5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Social Security 5c. Required repayments of retirement fund loans 5c. Social Security 5c. Insurance 5c. \$ 0.000 \$ NIA 5c. Insurance 5c. \$ 47.15 \$ NIA 5c. Insurance 5c. \$ 1.519.55 \$ NIA 5c. Insurance 5c. \$ 1.519.55 \$ NIA 5c. Insurance 5c. \$ 0.00 \$ NIA 5c. In		Cop	by line 4 here	4.	\$	5,027.12	\$	N/A	
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8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: Federal Tax Refund 8h. \$ 0.00 \$ N/A  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 525.00 \$ N/A  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  No.  No.		8c.	regularly receive		-				
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8h. Other monthly income. Specify: Federal Tax Refund  8h. \$ 525.00 + \$ N/A  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 525.00 \$ N/A  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$ 4,032.57 Combined monthly income  No.		8f.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		\$	0.00	\$	N/A	
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Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$\frac{4,032.57}{Combined monthly income}}\$  13. Do you expect an increase or decrease within the year after you file this form?  No.	11.	Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.							
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13. Do you expect an increase or decrease within the year after you file this form?  No.									
	13.	Do y ■	• •	?				monthly	, income

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